

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: ANDO et al.
 Docket: 12844.0042US01
 Title: SWITCHING POWER SOURCE APPARATUS

22240 U.S. PTO
 10/667946
 09/22/03

CERTIFICATE UNDER 37 CFR 1.10 'Express Mail' mailing label number: EV 321726879 US Date of Deposit: September 22, 2003 I hereby certify that this paper or fee is being deposited with the United States Postal Service 'Express Mail Post Office To Addressee' service under 37 CFR 1.10 and is addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. <div style="text-align: right;"> By: <u>Teresa Anderson</u> Name: Teresa Anderson </div>

Mail Stop PATENT APPLICATION
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

We are transmitting herewith the attached:

- ☒ Transmittal sheet, in duplicate, containing Certificate under 37 CFR 1.10.
- ☒ Utility Patent Application: Spec. 17 pgs; 3 claims; Abstract 1 pg.
 The fee has been calculated as shown below in the 'Claims as Filed' table.
- ☒ 3 sheets of informal drawings
- ☒ Certified copy of a Japanese application, Serial No. 2002-285016, filed September 30, 2002, the right of priority of which is claimed under 35 U.S.C. 119
- ☒ A signed Combined Declaration and Power of Attorney
- ☒ Assignment of the invention to ROHM CO., LTD., Recordation Form Cover Sheet
- ☒ Please charge deposit account #132725 \$750.00 to cover the Filing Fee
- ☒ Please charge deposit account #132725 \$40.00 to cover the Assignment Recording Fee.
- ☒ Information Disclosure Statement, Form 1449, 1 reference(s).
- ☒ Application Data Sheet, 4 pages.
- ☒ Return postcard

CLAIMS AS FILED

Number of Claims Filed		In Excess of:		Number Extra		Rate		Fee
Basic Filing Fee								\$750.00
Total Claims								
3	-	20	=	0	x	18.00	=	\$0.00
Independent Claims								
1	-	3	=	0	x	84.00	=	\$0.00
MULTIPLE DEPENDENT CLAIM FEE								\$0.00
TOTAL FILING FEE								\$750.00

Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

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By: [Signature]
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 Initials: DPM/ame



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